

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000009132

FILED
Mar 12, 2008
Secretary of State

Entity Name: CHANTEL FOSTER CARE HOME INC.

Current Principal Place of Business:

9 EAST 11TH STREET
APOPKA, FL 32703

New Principal Place of Business:

Current Mailing Address:

9 EAST 11TH STREET
APOPKA, FL 32703

New Mailing Address:

FEI Number: 33-1164005

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PRESTON, CHANTEL
7818 HAWK CREST LANE
ORLANDO, FL 32818 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PRESTON, CHANTEL
Address: 7818 HAWK CREST LANE
City-St-Zip: ORLANDO, FL 32818

Title: T () Delete
Name: HAMPTON, LORETHA
Address: 1306 SOUTH HIGHLAND AVE
City-St-Zip: APOPKA, FL 32703

Title: S () Delete
Name: JEFFERSON, DELINA
Address: 1564 PARK AVE
City-St-Zip: APOPKA, FL 32703

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHANTEL PRESTON

P

03/12/2008

Electronic Signature of Signing Officer or Director

Date